

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | 5/10/01 | 50 | 09-26-01 |
| O.I.P.E. CLASSIFIER | CH/TK | 1061 | 09-29-01 |
| FORMALITY REVIEW | TK | 1061 | 10/17/01 |
| RESPONSE FORMALITY REVIEW | R-B | 1061 | 01/09/02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 3/26/01 |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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10/7/01
BS